

Los Alamos

NATIONAL LABORATORY

Human Resources Division
Los Alamos, New Mexico 87545

SUPPLEMENTAL EMPLOYMENT INFORMATION

Personal Information

IMPORTANT: This form MUST BE FULLY AND ACCURATELY COMPLETED, including signature and date signed. Carefully read Signature Certification and Authorization section on next page.

Name (Last, First, Middle)		Any other name under which you have been employed	Social Security Number
Permanent Address(Street, City, State, Zip Code)		Date	
Present or School Address(Street, City, State, Zip Code)		Telephone Number ()	
Where can you be contacted Monday through Friday, 8:00 a.m. to 5:00 p.m.		Telephone Number ()	

EMPLOYMENT HISTORY

Account for all employment, including U.S. Military Service. Indicate average number of hours worked per week for any positions less than full-time. Attach supplemental sheets if necessary. Start with your most recent position and work backward. For time unemployed or in school, furnish dates and addresses on back/reverse side.

1	From (Month/Year)	To (Month/Year)	Starting Salary (Annual)	Present or Final Salary	Hours Per Week
Name and Address of Present Employer					
Name of Supervisor			(May we contact at this time?) <input type="checkbox"/> Yes <input type="checkbox"/> No	Telephone Number ()	
Your Job Title			Reason for Leaving		
2	From (Month/Year)	To (Month/Year)	Starting Salary (Annual)	Present or Final Salary	Hours Per Week
Name and Address of Employer					
3	From (Month/Year)	To (Month/Year)	Starting Salary (Annual)	Present or Final Salary	Hours Per Week
Name and Address of Employer					
4	From (Month/Year)	To (Month/Year)	Starting Salary (Annual)	Present or Final Salary	Hours Per Week
Name and Address of Employer					

For any of the following questions that you answer "Yes," provide the information required under ADDITIONAL INFORMATION on back/reverse side.

1)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you signed or is it anticipated that you will sign a nondisclosure agreement, such as patent agreements or security classification restrictions?
2)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been employed by the Los Alamos National Laboratory? Indicate Group/Division, Job Title, dates, and reason for leaving.
3)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you had a Q-Clearance granted by the Department of Energy, Energy Research and Development Administration, Atomic Energy Commission, Department of Defense, Central Intelligence Agency, or other federal government agencies? Provide the name of the employer and inclusive dates of the clearance.
4)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you had a Q-clearance suspended, denied, or revoked? Give name of employer, date, and explain the circumstances.
5)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been discharged by an employer? Give name of employer, address, and date of discharge and explain the circumstances.
6)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of a felony? Furnish details.

PERSONAL DATA

Are you 18 years old or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	Between 16 and 18? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a Permanent Resident Alien? <input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Temporary Visa			
Do you have near-relatives employed by the Laboratory(spouse, parents, children, brothers, sisters, step-relatives, and in-laws in the same relationship)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give their names and their Laboratory groups.(Use ADDITIONAL INFORMATION area following, if necessary).			

REFERENCES

List three references pertaining to your past employment, education or character, e.g. former supervisors and faculty members.

Name	Telephone Number ()	Relationship
Address (City, State, Zip Code)		
Name	Telephone Number ()	Relationship
Address (City, State, Zip Code)		
Name	Telephone Number ()	Relationship
Address (City, State, Zip Code)		

EDUCATION AND TRAINING

For attendance at a college, university, vocational school, apprenticeship program, or technical institute, give the information requested for each undergraduate and graduate degree. If you did not receive a degree but have some college training, please give dates of attendance and total hours completed.

School			School		
City		State	City		State
From (Month/Year)	To (Month/Year)	No. of Credit Hours	From (Month/Year)	To (Month/Year)	No. of Credit Hours
Major		Minor	Major		Minor
Degree		Date Granted or Expected	Degree		Date Granted or Expected
School			School		
City		State	City		State
From (Month/Year)	To (Month/Year)	No. of Credit Hours	From (Month/Year)	To (Month/Year)	No. of Credit Hours
Major		Minor	Major		Minor
Degree		Date Granted or Expected	Degree		Date Granted or Expected

Undergraduate Grade Point Average _____ Where A= _____	Graduate Grade Point Average _____ Where A= _____
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ADDITIONAL INFORMATION

To explain the YES answers on page 1 of this form, include the number of the question to which you are responding. This space may also be used to describe any relevant volunteer work experience and time unemployed or in school. (Indicate approximate number of hours worked per month.) Use this space for additional information about near-relatives. Attach additional sheets if necessary.

SIGNATURE CERTIFICATION AND AUTHORIZATION

I certify that the information on this document is correct and complete to the best of my knowledge and belief. In the event of employment, I understand that false or misleading information or omission given in my resume, interview(s), or related correspondence may result in discharge. I am also authorizing the release of information to the Los Alamos National Laboratory by any party for the purpose of verifying the information I have provided.

Print Name (Last, First, Middle)	Signature	Date
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The following information pertains to the SUPPLEMENTAL EMPLOYMENT INFORMATION you are now being asked to furnish.

PRIVACY NOTIFICATION

The State of California Information Practices Act of 1977 requires the Los Alamos National Laboratory to provide the following notification to individuals who are asked to supply personal information: The Laboratory requests information on this form in order to determine your qualifications for employment. The Personnel Records Section is responsible for maintaining the information contained on this form. Furnishing the requested information is voluntary. There is no penalty for not providing the information. Failure to provide all or part of the information may result in an inability to give further consideration for possible Laboratory employment. The information you furnish may be used by Laboratory staff responsible for employment decisions and personnel administration functions.

IRCA COMPLIANCE

Under Federal Law, the Los Alamos National Laboratory may employ only individuals who are legally able to work in the United States as established by providing documents specified in the Immigration Reform and Control Act of 1986.

AFFIRMATIVE ACTION/EQUAL EMPLOYMENT OPPORTUNITY (AA/EEO) INFORMATION

The University of California, in compliance with Titles VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, the Age Discrimination in Employment Act of 1967, and the Age Discrimination Act of 1975, does not discriminate on the basis of race, color national origin, religion, sex, disability, or age in any of its policies, procedures, or practices; nor does the University, in compliance with Section 402 of the Vietnam Era Veterans Readjustment Act of 1974, and Section 12940 of the State of California Government Code, discriminate against any employees or applicants for employment because they are special disabled veterans or veterans of the Vietnam era, or because of their medical condition as defined in Section 12926 of the California Government Code, their ancestry, or their marital status; nor does the University discriminate on the basis of citizenship, within the limits imposed by law or University policy; nor does the University discriminate on the basis of sexual orientation. This nondiscrimination policy covers admission, access, and treatment in University programs and activities and application for and treatment in University employment. In conformance with University policy and pursuant to Executive Orders 11246 and 11375, Sections 503 and 504 of the Rehabilitation Act of 1973, and Section 402 of the Vietnam Era Readjustment Act of 1974, the University of California is an affirmative action/equal opportunity employer.

Inquiries regarding the University's Affirmative Action and Equal Employment Opportunity policies may be directed to:
Equal Employment Opportunity Officer, Los Alamos, National Laboratory
Los Alamos, New Mexico 87545
(505) 665-2117/Mail Stop A130